An Inaugural Dissertation

on

Dysentery

by

William Buchanan

of

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Dysentery

As the disease of dysentery, is one, so frequently met with in our country, and one, which calls for the most prompt, and immediate assistance to check its destructive ravages; I have chosen it as the subject of the present dissertation. — Notwithstanding the numerous and important improvements, which have been made in medical science, we have still to lament that this disease continues to be a fruitful source of misery amongst us; more particularly in fleets and armies where we have still to deplore its too frequent and extensive fatality. —

We consider the dysentery as an inflamm-
-atory disease, thrown in upon the bowels, or
as, I think, Doctor Rush very happily and
appropriately terms it, an intestinal sta-
-te of fever. It generally makes its appear-
-ance in those seasons, in which intermit-
-tent and remittent fevers are most preva-
-lant; viz, about the end of summer or
begenning of autumn, tho it is not confin-
-ed to any particular season. It commen-
-ces with chillines and rigors, which are
soon succeeded by a hot fit, and other
symptoms of pyrexia. The premonitory
symptoms of this disease, are, a general
languor, and sense of lassitude, accom-

-pania with a defect of appetite, and loath-
-ing of food, a bitter taste in the mouth, is not
infrequently experienced, together with unea-
-sinesses in the upper bowels, nausea, frequent in-
-clination to vomit, with pain in the lower
bowels. In this forming state, if something
be not done to check its progress, the above
symptoms are soon followed by an increased
action in the arterial system, excessive pain
in the head, great thirst, and sometimes a co-
-pious discharge of bilious matter from the
intestines. The pulse which in the commence-
-ment, was feeble, and almost imperceptible,
now becomes full and strong, and the patient
is seized with troublesome griping and

tenesmus — The above symptoms are not re-
-gularly and invariably attendant, for it
sometimes attacks with a slight pain in
the head, unaccompanied with any ap-
-parently febrile action, followed by te-
-nesmus and frequent, tho small, dischar-
-ges, consisting chiefly of mucus, sometimes
of blood and mucus, intimately blended.—
The dysentery sometimes occurs in the
form of an intermittent, but more fre-
-quently in a remittent form, approach-
-ing to that of a continued fever, attend-
-ed with highly inflammatory symptoms.
The evacuations from the bowels differ
materially in their appearance, some-

-times they consist wholly of mucus, now & then of pure blood, and in a majority of cases, there is an intermixture of blood and mucus.— Notwithstanding the frequent discharges by stool, natural fæces seldom appear, and when they do occur, are evacuated in small, round, indurated masses, termed by authors, scybala.— Upon the expulsion of these, whether effected by the efforts of nature or solicited by art, the patient is commonly relieved for a short time, from the troublesome and distressing griping and tenesmus.— But these remissions are treacherous and of short duration, for it

is not long before all the symptoms recur with increased violence. The disease now daily gains strength, and if not attentively and skilfully managed soon terminates the existance of the unfortunate sufferer. The dysentery is the offspring of miasmata, according to Doctor Rush, and is invited to the bowels by those causes which debilitate them, as rapid aliment &c. A moist atmosphere in hot seasons and sudden transitions from heat to cold, by checking perspiration, and throwing it on an internal part, become causes of this disease, when thrown on the bowels, as they do of pulmonic in-

-flammation, when thrown upon the lungs.— The predisposing or occasional cause of this disease, is debility, whether induced directly or indirectly.— I will now enu=merate some of the causes which act by inducing this debility. under this head may be classed the passions of the mind as grief, fear &c. That these exert considerable debilitating effects, is well known from daily experience.— Cold. That this is a powerful cause in produ=-cing debility, will be acknowledged on all hands, as when applied to the body, it universally produces languor and inactivity, and is well known to dimi=

-nish the force and frequency of the pulse.
A frequent, as well as truly lamentable ca
-use of this, as of many other violent diseases,
is, intemperance in the use of ardent spi-
-rits; these when taken in large quantities
not only debilitate the whole frame, but
render it extremely excitable, consequent
-ly susceptible to the whole train of
diseases, to which the human body is
subject. Great mental or corporeal fa-
-tigue, may be considered as a frequent
cause of this disease. I will now say
a few words with respect to the prox-
-imate cause; the opinion taught by
Dr Cullen, is, that it consists in a

preternatural constriction of the colon, oc-
-casioning at the same time, those spas-
-modic efforts which are felt in severe
griping, and which efforts propagated
downwards to the rectum, occasion there,
the frequent mucous stools and tenesmus.—
That a constriction does exist, I will not
pretend to deny; but that the Doctor
has mistaken the effect, for the cause;
will, I am sure, appear evident, when we
advert to the causes which act remotely
in producing the disease.—That the prox-
-imate cause consists in a morbid and
irregular action, in the bloodvessels of
the part, will appear clear to every can-

-did and unprejudiced mind.

Having described the causes, seat, and signs of this disease, in as clear a manner as my time will allow, I shall now proceed to its cure. Among the remedies enumerated for its removal; Bloodletting has very deservedly held a high rank, When the disease is recent, and the febrile symptoms do not run high, a gentle purgative will generally prove effectual in removing it. On the contrary when the pulse is full or tense, heat, thirst and other feverish symptoms considerable, it is sometimes extremely obstinate, and demands the most prompt and powerful remedies; among

which bloodletting most assuredly stands highest, this should be regulated by the state of the system, and urgency of the case.— We should continue it as long as the tension in the pulse, and pain in the bowels, shall demand.— A depressed pulse, which we sometimes meet with in this disease, as in many others of inflammatory action; so far from biding us to withhold the lancet, calls more loudly for its use.— Emetics are generally of little service, except when there is considerable nausea, depending upon a redundancy of bile; in this case the tartarised antimony and ipecacuanha may be used in

Purges have been very deservedly considered as an important remedy, they should be given early in the complaint, and repeat=
=ed in some cases daily.— They should be of the mildest kind, as the more dras=
=tic would be apt to debilitate the intes=
=tines, and thereby aggravate the disease.— They act by diminishing the morbid excitement in the intestinal canal, and by removing all irritating matter, which we know to be a cause in the greater num=
=ber of cases, of the tenesmus and griping.— Altho purgatives should be given with an intention to evacuate copiously, yet we should be careful to avoid those which

may prove too stimulating. For this reason the neutral purging salts, have been much used, such as, sulphate of soda, sulphate of magnesia &c. As there is a necessity for frequent repetitions of these medicines, it is a matter of no small importance, to render them as palatable as possible; this may be effected by the addition of a small portion of the chrystals of tartar, or lemon juice.— Castor oil when good and free from rancidity is a very excel-
-lent cathartic in dysentery; frequently easing the griping; and procuring copi-
-ous discharges.— Many other purgatives have been employed, as rheubarb, Jalape &c

but I think them far inferior to those a=
=bove enumerated. — Demulcents have been
highly and deservedly exloled in this
disease; they should consist of flaxseed
tea, barley water, decoction or infusion of
the shavings of hartshorn &c — Mucilaginous
substances should be taken by the mouth
and injected per anum. — After sufficient
depletion we should resort to opium,
which should be given in small doses
during the day, and large ones at night,
it has been also used with considerable
advantage in the form of enema. — —
Blisters have been used with wonderful ad=
=vantage, from the intimate connection be=

tween the skin and bowels, but we should be careful not to apply them before, by suf-ficient depletion, we have reduced the sys-tem to the blistering point; otherwise they will have either no effect, or prove of dis-service. They produce their beneficial ef-fects by translating morbid excitement to the skin, thereby producing a solu-tion of the disease. When it puts on a remittent form, which is not unusual, we should have recourse to the bark, being cautious not to exhibit it before the system be sufficiently reduced, by previous depletion. Finally when the above remedies prove unsuccessful

mercury should be used so as to induce a ptialism, the disease in the mouth curing that in the bowels, by translat=ing it to a less vital part.